

## CITY OF THE COLONY

## THE VOLUNTEER ASSISTANCE PROGRAM VOLUNTEER RELEASE FORM

In return for receiving permission from the City of The Colony, Texas to allow me to participate as a volunteer, I agree to assume all risks of loss and injury that may arise out of participation.

I hereby release and agree to indemnify the City of The Colony, Texas and their respective agents, officers, and employees from any and all liability, claims, demands, and causes of action whatsoever, related to any loss or damage to my person or property whether anticipated or unanticipated. This release shall be binding on me, my heirs, successors, assigns, administrators and/or executors.

I realize that working as a volunteer may involve the use of tools as well as digging and lifting heavy objects. I will be working around other participants who may not be accustomed to this type of labor. I am aware of the risks and hazards inherent in participating and do herby assume sole responsibility for all such risks and waive all recourse against The City of The Colony, Texas.

I hereby acknowledge that I have read, understood and do voluntarily sign the foregoing release.

RELEASE  Do you object to being photographed or filmed during volunt	eer time?	YES	NO
Volunteer Information:			
Print Your Name:	Date:		
Signature:			
Signature of parent or guardian if under 18:			